

*If you are using a printed copy of this procedure, and not the on-screen version, then you **MUST** make sure the dates at the bottom of the printed copy and the on-screen version match.
The on-screen version of the Collider-Accelerator Department Procedure is the Official Version.
Hard copies of all signed, official, C-A Operating Procedures are kept on file in the C-A ESHQ Training Office, Bldg. 911A.*

C-A OPERATIONS PROCEDURES MANUAL

ATTACHMENT

4.120.54.c U-Down & V-Primary (PEER 25) Crash Tests

C-A-OPM Procedures in which this Attachment is used.		
4.120.54		

Hand Processed Changes

<u>HPC No.</u>	<u>Date</u>	<u>Page Nos.</u>	<u>Initials</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Approved: Signature on File _____
 Collider-Accelerator Department Chairman _____ Date _____

V. Castillo

4.120.54.c U-Down & V-Primary (PEER 25) Crash Tests

PASS SEMI-ANNUAL ACCEPTANCE TEST PROTOCOL

Division A Software Filename and Checksum: Title: _____ Checksum: _____

Division B Software Filename and Checksum: Title: _____ Checksum: _____

Initial testing complete:

Test Team Leader's Name (Print): _____ Life Number: _____

Test Team Leader's Name (Sign): _____ Date: ____/____/____

Acceptance test procedure complete (following repairs and retesting if required):

Test Team Leader's Name (Print): _____ Life Number: _____

Test Team Leader's Name (Sign): _____ Date: ____/____/____

Test results reviewed by:

Safety Section Head's Name (Print): _____ Life Number: _____

Safety Section Head's Name (Sign): _____ Date: ____/____/____

Test results accepted by Radiation Safety Committee:

RSC Member's Name (Print): _____ Life Number: _____

RSC Member's Name (Sign): _____ Date: ____/____/____

1.1 Test of U-Down Crash Systems

- ☐ **CONDUCT** Visual check on Crash systems, following columns 1- 2, Table 1
☐ **VERIFY** In column 3, Table 1, all visual check problems are **CORRECTED**
PLACE Peer 7 in **MODE 8**
☐ **VERIFY** Peer 7 is in **Restricted Access** **MODE 8**
TEST **U-Down** Crash systems following Table 1, columns 4-10, below.

Crash systems	Visual check √=o.k. x=pblm	Verify all x's corr.	Pull crash cord from far end	Verify crash at MCR	Verify change to Mode 2	Rearm crash device	Reset crash at MCR	Verify crash reset at MCR	Change to Mode 8 for next test
Udn CO – 1 u/s		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
Udn CO – 1 d/s		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
Udn CO – 2 u/s		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
Udn CO - 2 d/s		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
Udn CO – 3 u/s		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
Udn CO – 3 d/s		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
Udn CO – 4 u/s		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
Udn CO – 4 d/s		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	

Table 1 – Test of U-Down Crash Systems

- ☐ Check for acceptance of Test of U-Down Crash Systems

1.2 Test of V-Primary Crash Systems

- CONDUCT** Visual check on Crash systems, following columns 1- 2, Table 2 below
- ☐ **VERIFY** In column 3, Table 1, all visual check problems are **CORRECTED**
- PLACE** Peer 7 in **MODE 8**
- ☐ **VERIFY** Peer 7 is in **Restricted Access** **MODE 8**
- TEST** **V-Primary** Crash systems following columns 4-10, Table 2.

Crash Button (CB)	Visual check √=o.k. x=pblm	Verify all x's corr.	Press Crash Button	Verify crash at MCR	Verify change to Mode 2	Retract Crash Button	Reset crash at MCR	Verify crash reset at MCR	Change to Mode 8 for next test
Vpr CB - 1		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
Vpr CB - 2		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
Vpr CB - 3		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	

Table 2 – Test of V-Primary Crash Systems

- ☐ Check for acceptance of Test of V-Primary Crash Systems

END OF TEST PROCEDURE

TTL: Sign for completion of initial testing: _____

Date: ____/____/____

TTL: Sign for completion of final testing: _____

Date: ____/____/____